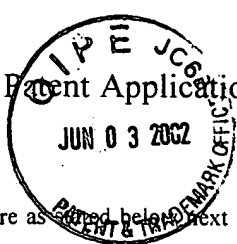


#5

# Combined Declaration for Patent Application and Power of Attorney



98-2163-P

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

APPARATUS AND METHOD FOR CONTROL OF TISSUE/IMPLANT INTERACTIONS. the specification of which

(check one)	<input checked="checked" type="checkbox"/>	is attached hereto.
		was filed on _____ as Application Serial No. _____
		and (if applicable) was amended on: _____

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, ' 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, ' 119 of any foreign application(s) for patent or inventor=s certificate listed below and have also identified below any foreign application for patent or inventor=s certificate having filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed	
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO

I hereby claim the benefit under Title 35, United States Code, ' 120 of any United States Application(s) listed below and , insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, ' 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulation, ' 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

09/443,857	November 19, 1999	Pending
(Application Serial No.)	(Filing Date)	(Status: patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status: patented, pending, abandoned)

hereby claim the benefit under Title 35, United States Code, ' 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER

FILING DATE

60/109,289

November 20, 1998

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys, and/or agents with full power of substitution, association, and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

**CUSTOMER NUMBER 23413**

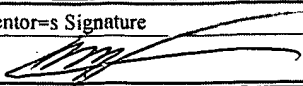
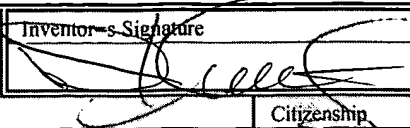
ADDRESS ALL CORRESPONDENCE TO:

**CANTOR COLBURN LLP**  
**55 Griffin Road South**  
**Bloomfield, CT 06002, USA**  
**Facsimile (860) 286-0115**

DIRECT ALL TELÉPHONE CALLS TO:

**Michael A. Cantor**  
**Philmore H. Colburn II**  
**(860) 286-2929**

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

Full Name of Sole or First Inventor	Inventor's Signature	Date
Francis Moussy		4/15/02
Residence	Citizenship	
285-C1 Main Street, Farmington, CT 06032	France	
Post Office Address		
285-C1 Main Street, Farmington, CT 06032		
Full Name of Second Joint Inventor, If Any	Inventor's Signature	Date
Donald Kreutzer		4/15/02
Residence	Citizenship	
14 Highwood Road, Avon, CT 06001	United States	
Post Office Address		
14 Highwood Road, Avon, CT 06001		
Full Name of Third Joint Inventor, If Any	Inventor's Signature	Date
Diane Burgess		
Residence	Citizenship	
626 Browns Road, Storrs, CT 06268	Great Britain	
Post Office Address		
626 Browns Road, Storrs, CT 06268		
Full Name of Fourth Joint Inventor, If Any	Inventor's Signature	Date
Jeffrey Koberstein		
Residence	Citizenship	
116 Wildwood Road, Mansfield, CT 06250	United States	
Post Office Address		
116 Wildwood Road, Mansfield, CT 06250		
Full Name of Fifth Joint Inventor, If Any	Inventor's Signature	Date
Fotios Papadimitrakopoulos		
Residence	Citizenship	
261 Woodland Road, Coventry, CT 06238	Greece	
Post Office Address		
261 Woodland Road, Coventry, CT 06238		
Full Name of Sixth Joint Inventor, If Any	Inventor's Signature	Date
Samuel Huang		
Residence	Citizenship	
9 Birch Road, Bloomfield, CT 06002	United States	
Post Office Address		
9 Birch Road, Bloomfield, CT 06002		

# Combined Declaration for Patent Application and Power of Attorney

98-2163-P

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

APPARATUS AND METHOD FOR CONTROL OF TISSUE/IMPLANT INTERACTIONS. the specification of which

(check one) ☒ is attached hereto.

was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_

and (if applicable) was amended on: \_\_\_\_\_

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, ' 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, ' 119 of any foreign application(s) for patent or inventor=s certificate listed below and have also identified below any foreign application for patent or inventor=s certificate having filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed	
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO

I hereby claim the benefit under Title 35, United States Code, ' 120 of any United States Application(s) listed below and , insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, ' 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulation, ' 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

09/443,857	November 19, 1999	Pending
(Application Serial No.)	(Filing Date)	(Status- patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status- patented, pending, abandoned)

hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER

60/109,289

FILING DATE

November 20, 1998

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys, and/or agents with full power of substitution, association, and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

**CUSTOMER NUMBER 23413**

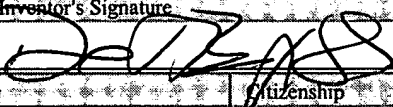
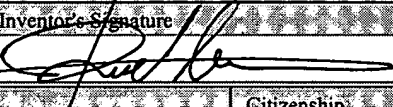
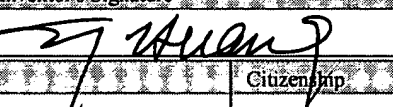
ADDRESS ALL CORRESPONDENCE TO:

**CANTOR COLBURN LLP**  
**55 Griffin Road South**  
**Bloomfield, CT 06002, USA**  
**Facsimile (860) 286-0115**

DIRECT ALL TELEPHONE CALLS TO:

**Michael A. Cantor**  
**Philmore H. Colburn II**  
**(860) 286-2929**

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

Full Name of Sole or First Inventor	Inventor's Signature	Date
Francis Moussy		
Residence	Citizenship	
285-C1 Main Street, Farmington, CT 06032	France	
Post Office Address		
285-C1 Main Street, Farmington, CT 06032		
Full Name of Second Joint Inventor, If Any	Inventor's Signature	Date
Donald Kreutzer		
Residence	Citizenship	
14 Highwood Road, Avon, CT 06001	United States	
Post Office Address		
14 Highwood Road, Avon, CT 06001		
Full Name of Third Joint Inventor, If Any	Inventor's Signature	Date
Diane Burgess		4/17/02
Residence	Citizenship	
626 Browns Road, Storrs, CT 06268	Great Britain	
Post Office Address		
626 Browns Road, Storrs, CT 06268		
Full Name of Fourth Joint Inventor, If Any	Inventor's Signature	Date
Jeffrey Koberstein		
Residence	Citizenship	
116 Wildwood Road, Mansfield, CT 06250	United States	
Post Office Address		
116 Wildwood Road, Mansfield, CT 06250		
Full Name of Fifth Joint Inventor, If Any	Inventor's Signature	Date
Fotios Papadimitrakopoulos		4/17/02
Residence	Citizenship	
261 Woodland Road, Coventry, CT 06238	Greece	
Post Office Address		
261 Woodland Road, Coventry, CT 06238		
Full Name of Sixth Joint Inventor, If Any	Inventor's Signature	Date
Samuel Huang		4/17/02
Residence	Citizenship	
9 Birch Road, Bloomfield, CT 06002	United States	
Post Office Address		
9 Birch Road, Bloomfield, CT 06002		